

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

Republican Party of Louisiana

ADDRESS (number and street)

11440 North Lake Sherwood Ave

☐Check if different  
than previously  
reported. (ACC)

Baton Rouge

LA

70816

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00187450

3. IS THIS  
REPORT☐NEW  
(N)

OR

☒AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report (Q1)☐July 15  
Quarterly Report (Q2)☐October 15  
Quarterly Report (Q3)☐January 31  
Quarterly Report (YE)☐July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☒

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE-Election**  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post -Election**  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

06

01

2006

through

06

30

2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Charlie Buckels

Signature of Treasurer

Electronically Filed by Charlie Buckels

Date

11

07

2006

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 02/2003)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
Republican Party of Louisiana

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	6	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
0	6	3	0	2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2006</span>		3612.53
(b) Cash on Hand at Beginning of Reporting Period .....	103728.05	
(c) Total Receipts (from Line 19) .....	30141.56	267466.50
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	133869.61	271079.03
7. Total Disbursements (from Line 31) .....	39562.06	176771.48
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	94307.55	94307.55
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	80299.37	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

Republican Party of Louisiana

Report Covering the Period:

From:

M M  
0 6D D  
0 1Y Y Y Y  
2 0 0 6

To:

M M  
0 6D D  
3 0Y Y Y Y  
2 0 0 6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	16400.00	63115.00
(i) Itemized (use Schedule A) .....	13468.07	48232.42
(ii) Unitemized .....	29868.07	111347.42
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➤	0.00	0.00
(b) Political Party Committees .....	0.00	14000.00
(c) Other Political Committees (such as PACs) .....	29868.07	125347.42
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ..... ➤		
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	245.00	6195.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	105000.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	28.49	30924.08
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	28.49	30924.08
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	30141.56	267466.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	30113.07	236542.42

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	5.03	5457.22
(ii) Non-Federal Share.....	28.49	30924.08
(b) Other Federal Operating Expenditures.....	27934.20	128795.84
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	27967.72	165177.14
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	11594.34	11594.34
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	11594.34	11594.34
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	39562.06	176771.48
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	39533.57	145847.40

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	29868.07	125347.42
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	29868.07	125347.42
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	27939.23	134253.06
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	245.00	6195.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	27694.23	128058.06

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 51

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

**A.** Full Name (Last, First, Middle Initial)  
Dudley Bertrand  
Mailing Address 111 Dupont Circle

City State Zip Code  
West Monroe LA 71291-4715

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 5 / 2 0 0 6

Transaction ID: 60619.C57792

Amount of Each Receipt this Period

100.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Manning Billeaud  
Mailing Address 145 Girard Woods Dr

City State Zip Code  
Lafayette LA 70503-2807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 0 6

Transaction ID: 60710.C58152

Amount of Each Receipt this Period

100.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Anthony Blalock

Mailing Address 202 Perdido Ln

City State Zip Code  
Lafayette LA 70503-5828

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Acadiana Renal Physicians

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 9 / 2 0 0 6

Transaction ID: 60710.C58100

Amount of Each Receipt this Period

1000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

1200.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 51

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

<b>A.</b> Full Name (Last, First, Middle Initial) Gail Broussard Mailing Address 203 Mathews Blvd City State Zip Code Lafayette LA 70508-5727 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Information Requested Occupation Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 200.00		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 9 / 2 0 0 6 <b>Transaction ID:</b> 60710.C58091 Amount of Each Receipt this Period 200.00 Receipt
<b>B.</b> Full Name (Last, First, Middle Initial) Greene S Butler Mailing Address 929 N Main St City State Zip Code Homer LA 71040-3845 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Information Requested Occupation Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6 <b>Transaction ID:</b> 60710.C58119 Amount of Each Receipt this Period 500.00 Receipt
<b>C.</b> Full Name (Last, First, Middle Initial) Richard Colton Mailing Address 1406 7th St City State Zip Code New Orleans LA 70115 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Businessman Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 6 <b>Transaction ID:</b> 60710.C58174 Amount of Each Receipt this Period 250.00 Receipt

SUBTOTAL of Receipts This Page (optional) .....

950.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 51

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

A. Full Name (Last, First, Middle Initial)

Clyde Courtright

Mailing Address 106 Clipper Cv

City State Zip Code  
Lafayette LA 70508-7024

FEC ID number of contributing federal political committee.

C

Name of Employer  
SelfOccupation  
Geologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 0 / 2 0 0 6

Transaction ID: 60710.C58048

Amount of Each Receipt this Period

500.00

Receipt

B. Full Name (Last, First, Middle Initial)

Dan Donald

Mailing Address PO Box 675

City State Zip Code  
Jennings LA 70546

FEC ID number of contributing federal political committee.

C

Name of Employer  
Jeff Davis Bank & TrustOccupation  
Banker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 3 / 2 0 0 6

Transaction ID: 60619.C57952

Amount of Each Receipt this Period

1000.00

Receipt

C. Full Name (Last, First, Middle Initial)

Sara Dunham

Mailing Address 2603 E Lakeshore Dr

City State Zip Code  
Baton Rouge LA 70808-2149

FEC ID number of contributing federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 0 6

Transaction ID: 60710.C58158

Amount of Each Receipt this Period

250.00

Receipt

SUBTOTAL of Receipts This Page (optional) .....

1750.00

TOTAL This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 51

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

**A.** Full Name (Last, First, Middle Initial)

Malcolm Falgoust

Mailing Address 117 Belle Terre

City State Zip Code  
 La Place LA 70068

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Keller Williams

Occupation  
Realtor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 0 1 / 2 0 0 6

Transaction ID: 60619.C57670

Amount of Each Receipt this Period

250.00

Receipt

**B.** Full Name (Last, First, Middle Initial)

Michael Futrell

Mailing Address 10875 Belle Cour Way

City State Zip Code  
 Shreveport LA 71106-4606

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Physican

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 1 9 / 2 0 0 6

Transaction ID: 60710.C58129

Amount of Each Receipt this Period

100.00

Receipt

**C.** Full Name (Last, First, Middle Initial)

Ernestine George

Mailing Address 222 Grand Ave

City State Zip Code  
 Lafayette LA 70503

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Sidewinder Pumps Inc

Occupation  
Secretary/ Treasurer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2350.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 1 2 / 2 0 0 6

Transaction ID: 60619.C57933

Amount of Each Receipt this Period

100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

450.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 51

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

<b>A.</b> Full Name (Last, First, Middle Initial) Ernestine George Mailing Address 222 Grand Ave City State Zip Code Lafayette LA 70503 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Sidewinder Pumps Inc Occupation Secretary/ Treasurer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2600.00		Date of Receipt MM / DD / YYYY 06 / 27 / 2006 <b>Transaction ID:</b> 60710.C58151 Amount of Each Receipt this Period 250.00 Receipt
<b>B.</b> Full Name (Last, First, Middle Initial) William Goggans Mailing Address 162 Chateau Latour Dr City State Zip Code Kenner LA 70065-2023 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 200.00		Date of Receipt MM / DD / YYYY 06 / 22 / 2006 <b>Transaction ID:</b> 60710.C58064 Amount of Each Receipt this Period 100.00 Receipt
<b>C.</b> Full Name (Last, First, Middle Initial) Richard Griffith Mailing Address PO Box 91610 City State Zip Code Lafayette LA 70509-1610 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Investor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00		Date of Receipt MM / DD / YYYY 06 / 09 / 2006 <b>Transaction ID:</b> 60619.C57869 Amount of Each Receipt this Period 100.00 Receipt

SUBTOTAL of Receipts This Page (optional) .....

450.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 11 / 51

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

<b>A.</b> Full Name (Last, First, Middle Initial) Richard Griffith Mailing Address PO Box 91610 City State Zip Code Lafayette LA 70509-1610 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Investor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 550.00		Date of Receipt MM / DD / YYYY 06 / 28 / 2006 <b>Transaction ID:</b> 60710.C58173 Amount of Each Receipt this Period 100.00 Receipt
<b>B.</b> Full Name (Last, First, Middle Initial) Gregory Hamer Mailing Address 805 Pine St City State Zip Code Morgan City LA 70380-1826 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer B & G Food Ent., Inc Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1250.00		Date of Receipt MM / DD / YYYY 06 / 20 / 2006 <b>Transaction ID:</b> 60710.C58051 Amount of Each Receipt this Period 250.00 Receipt
<b>C.</b> Full Name (Last, First, Middle Initial) Fred Hogeman Mailing Address 3154 College Dr Ste B City State Zip Code Baton Rouge LA 70808-3174 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Information Requested Occupation Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 200.00		Date of Receipt MM / DD / YYYY 06 / 09 / 2006 <b>Transaction ID:</b> 60619.C57870 Amount of Each Receipt this Period 100.00 Receipt

SUBTOTAL of Receipts This Page (optional) .....

450.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 51

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

A. Full Name (Last, First, Middle Initial)

Monty Joseph Ingles

Mailing Address PO Box 485

City State Zip Code  
 Folsom LA 70437-0485

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 0 7 / 2 0 0 6

Transaction ID: 60619.C57854

Amount of Each Receipt this Period

100.00

Receipt

B. Full Name (Last, First, Middle Initial)

Joe Klutts

Mailing Address 328 Martial Avenue

City State Zip Code  
 Lafayette LA 70508

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Geologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 0 9 / 2 0 0 6

Transaction ID: 60619.C57894

Amount of Each Receipt this Period

250.00

Receipt

C. Full Name (Last, First, Middle Initial)

Charles Lane

Mailing Address 201 St Charles Ave

City State Zip Code  
 New Orleans LA 70170

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Jones, Walker et. al

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 2 1 / 2 0 0 6

Transaction ID: 60710.C58077

Amount of Each Receipt this Period

1000.00

Receipt

SUBTOTAL of Receipts This Page (optional) .....

1350.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 51

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

A. Full Name (Last, First, Middle Initial)

Walter Ledet

Mailing Address 914 Cypress St

City State Zip Code  
 Sulphur LA 70663

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 1 3 / 2 0 0 6

Transaction ID: 60619.C57945

Amount of Each Receipt this Period

250.00

Receipt

B. Full Name (Last, First, Middle Initial)

Edward Leger

Mailing Address 1116 N. Ave. D

City State Zip Code  
 Crowley LA 70526

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LA Pac Manufacturing

Occupation  
General Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

465.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 1 6 / 2 0 0 6

Transaction ID: 60710.C58145

Amount of Each Receipt this Period

100.00

Receipt

C. Full Name (Last, First, Middle Initial)

Marcie Little

Mailing Address 218 Circle Dr

City State Zip Code  
 Franklin LA 70538

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Best efforts

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 1 9 / 2 0 0 6

Transaction ID: 60710.C58102

Amount of Each Receipt this Period

2000.00

Receipt

SUBTOTAL of Receipts This Page (optional) .....

2350.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 51

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

<b>A.</b> Full Name (Last, First, Middle Initial) Ross Little		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 9 / 2 0 0 6
Mailing Address 100 Harwell Drive		<b>Transaction ID:</b> 60710.C58095
City Lafayette	State LA	Zip Code 70503
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer Teche Federal Bank	Occupation Marketing Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	
		Receipt

<b>B.</b> Full Name (Last, First, Middle Initial) Stuart Lunn		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 6
Mailing Address 717 Amsouth Bank Building		<b>Transaction ID:</b> 60619.C57925
City Shreveport	State LA	Zip Code 71101
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Self	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	
		Receipt

<b>C.</b> Full Name (Last, First, Middle Initial) Janice Mosing		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address 131 Wembley Road		<b>Transaction ID:</b> 60710.C58187
City Lafayette	State LA	Zip Code 70503-3568
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer None	Occupation Housewife	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
		Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

2600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 51

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

**A.** Full Name (Last, First, Middle Initial)  
 Kam Movassaghi  
 Mailing Address 9253 N Berkley Hills Dr

City State Zip Code  
 Baton Rouge LA 70809-2470

FEC ID number of contributing federal political committee.

C

Name of Employer Information Requested

Occupation Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 1 9 / 2 0 0 6

Transaction ID: 60710.C58093

Amount of Each Receipt this Period

100.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
 Dave Roberts  
 Mailing Address 17747 Airline Hwy

City State Zip Code  
 Prairieville LA 70769-3701

FEC ID number of contributing federal political committee.

C

Name of Employer Excel

Occupation pres/ceo

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 0 9 / 2 0 0 6

Transaction ID: 60619.C57857

Amount of Each Receipt this Period

1000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
 Lawrence Sandoz  
 Mailing Address P O Box 10

City State Zip Code  
 Opelousas LA 70571

FEC ID number of contributing federal political committee.

C

Name of Employer Self

Occupation Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 0 7 / 2 0 0 6

Transaction ID: 60619.C57851

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional) .....

1200.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 51

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

**A.** Full Name (Last, First, Middle Initial)

Bonnie Schulz

Mailing Address 7 Sparrow Ln

City State Zip Code  
 New Orleans LA 70123-2033

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Real Estate Broker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 2 0 / 2 0 0 6

Transaction ID: 60710.C58054

Amount of Each Receipt this Period

500.00

Receipt

**B.** Full Name (Last, First, Middle Initial)

Benita Scott

Mailing Address 1322 Brooklyn Avenue

City State Zip Code  
 Metairie LA 70010

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
East Jefferson General Ho-  
spita

Occupation  
activities therapist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 2 0 / 2 0 0 6

Transaction ID: 60710.C58143

Amount of Each Receipt this Period

100.00

Receipt

**C.** Full Name (Last, First, Middle Initial)

John Shank

Mailing Address 4116 Woodside Drive

City State Zip Code  
 Lake Charles LA 70605

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 0 6 / 2 0 0 6

Transaction ID: 60619.C57830

Amount of Each Receipt this Period

100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

700.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 51

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

**A.** Full Name (Last, First, Middle Initial)  
Ruth Ulrich  
Mailing Address 406 Forsythe Avenue

City State Zip Code  
Monroe LA 71201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Out of the Box Designs

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 0 / 2 0 0 6

Transaction ID: 60710.C58142

Amount of Each Receipt this Period

100.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Margie Villere  
Mailing Address 1443 Eleonore St

City State Zip Code  
New Orleans LA 70115

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 3 / 2 0 0 6

Transaction ID: 60710.C58112

Amount of Each Receipt this Period

2500.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Annette White  
Mailing Address 106 Wilree Drive

City State Zip Code  
New Iberia LA 70563

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 9 / 2 0 0 6

Transaction ID: 60619.C57863

Amount of Each Receipt this Period

100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

2700.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 51

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

**A.**

Full Name (Last, First, Middle Initial)

Richard Williams

Mailing Address 1126 Rosetta St

City

Lake Charles

State

LA

Zip Code

70607-1928

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Information Requested

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 5 / 2 0 0 6

Transaction ID: 60619.C57758

Amount of Each Receipt this Period

250.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

250.00

**TOTAL** This Period (last page this line number only) .....

16400.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 51

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

**A.** Full Name (Last, First, Middle Initial)  
La Workers Comp Corp

Mailing Address 2237 S Acadian Thruway Ste 102

City State Zip Code  
Baton Rouge LA 70808-

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 9 / 2 0 0 6

Transaction ID: 60710.C58099

Amount of Each Receipt this Period

245.00

Offsets to Operating Expe-  
nditu

**SUBTOTAL** of Receipts This Page (optional) .....

245.00

**TOTAL** This Period (last page this line number only) .....

245.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 20 / 51

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial)

## **A. ADT Security Systems**

Mailing Address 8683 Siegen Lane

City State Zip Code  
Baton Rouge LA 70810-

Purpose of Disbursement  
SECURITY

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60714.E12998

Date of Disbursement

/   /

Amount of Each Disbursement this Period

34.99

SECURITY

Full Name (Last, First, Middle Initial)

## **B. Aristotle International**

Mailing Address 205 Pennsylvania Ave SE

City State Zip Code  
Washington DC 20003-

Purpose of Disbursement  
SOFTWARE HOSTING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60714.E12903

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

SOFTWARE HOSTING

Full Name (Last, First, Middle Initial)

## **C. Aristotle International**

Mailing Address 205 Pennsylvania Ave SE

City State Zip Code  
Washington DC 20003-

Purpose of Disbursement  
SOFTWARE HOSTING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60714.E12952

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

SOFTWARE HOSTING

**SUBTOTAL** of Disbursements This Page (optional) .....

2034.99

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 21 / 51

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial)

**A.** Blue Cross Blue Shield

Mailing Address PO Box 261798

City Baton Rouge State LA Zip Code 70826-

Purpose of Disbursement  
HEALTH INS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60714.E12909

Date of Disbursement

06 / 09 / 2006

Amount of Each Disbursement this Period

96.86

HEALTH INS

Full Name (Last, First, Middle Initial)

**B.** Blue Cross Blue Shield

Mailing Address PO Box 261798

City Baton Rouge State LA Zip Code 70826-

Purpose of Disbursement  
HEALTH INS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60714.E12967

Date of Disbursement

06 / 24 / 2006

Amount of Each Disbursement this Period

215.15

HEALTH INS

Full Name (Last, First, Middle Initial)

**C.** Blue Cross Blue Shield

Mailing Address PO Box 261798

City Baton Rouge State LA Zip Code 70826-

Purpose of Disbursement  
HEALTH INS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60714.E12988

Date of Disbursement

06 / 29 / 2006

Amount of Each Disbursement this Period

312.01

HEALTH INS

**SUBTOTAL** of Disbursements This Page (optional) .....

624.02

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 22 / 51

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial)

**A.** Canon Financial Services, Inc

Mailing Address P. O. Box 4004

City Carol Stream State IL Zip Code 60197-4004

Purpose of Disbursement  
COPIER RENTAL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60714.E12911

Date of Disbursement

/   /

Amount of Each Disbursement this Period

COPIER RENTAL

Full Name (Last, First, Middle Initial)

**B.** Cingular Wireless

Mailing Address PO Box 650584

City Dallas State TX Zip Code 75265-0584

Purpose of Disbursement  
CELL PHONE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60714.E12961

Date of Disbursement

/   /

Amount of Each Disbursement this Period

CELL PHONE

Full Name (Last, First, Middle Initial)

**C.** Computer Evolutions

Mailing Address 14465 Wax Rd Ste B

City Baton Rouge State LA Zip Code 70818-4233

Purpose of Disbursement  
COMPUTER REPAIR

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60714.E12913

Date of Disbursement

/   /

Amount of Each Disbursement this Period

COMPUTER REPAIR

**SUBTOTAL** of Disbursements This Page (optional) .....

**1073.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 23 / 51

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A.</b> Full Name (Last, First, Middle Initial) Karen Connolly		<b>Transaction ID:</b> 60714.E12885 <b>Date of Disbursement</b> <div> <div>06</div> <div>09</div> <div>2006</div> </div>	
Mailing Address 6880 Christopher			
City Greenwell Springs	State LA	Zip Code 70739-	Amount of Each Disbursement this Period <div>836.45</div>
Purpose of Disbursement SALARY		<div></div>	
Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		SALARY

  

<b>B.</b> Full Name (Last, First, Middle Initial) Karen Connolly		<b>Transaction ID:</b> 60714.E12886 <b>Date of Disbursement</b> <div> <div>06</div> <div>20</div> <div>2006</div> </div>	
Mailing Address 6880 Christopher			
City Greenwell Springs	State LA	Zip Code 70739-	Amount of Each Disbursement this Period <div>836.45</div>
Purpose of Disbursement SALARY		<div></div>	
Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		SALARY

  

<b>C.</b> Full Name (Last, First, Middle Initial) Continental Airlines		<b>Transaction ID:</b> 60714.E12959 <b>Date of Disbursement</b> <div> <div>06</div> <div>20</div> <div>2006</div> </div>	
Mailing Address			
City	State	Zip Code -	Amount of Each Disbursement this Period <div>982.40</div>
Purpose of Disbursement GENERIC TRAVEL		<div></div>	
Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		GENERIC TRAVEL

**SUBTOTAL** of Disbursements This Page (optional) .....

**2655.30**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 24 / 51

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial)

## **A. Cox Communications**

Mailing Address P O Box 139004

City Tyler State TX Zip Code 75713-9004

Purpose of Disbursement  
TELEPHONES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60714.E12997

Date of Disbursement

06 / 29 / 2006

Amount of Each Disbursement this Period

383.19

TELEPHONES

Full Name (Last, First, Middle Initial)

## **B. Jody Crouch**

Mailing Address 212 Loop Dr

City Slidell State LA Zip Code 70458-1320

Purpose of Disbursement  
INTERN SALARY

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60714.E12882

Date of Disbursement

06 / 06 / 2006

Amount of Each Disbursement this Period

316.00

INTERN SALARY

Full Name (Last, First, Middle Initial)

## **C. Jody Crouch**

Mailing Address 212 Loop Dr

City Slidell State LA Zip Code 70458-1320

Purpose of Disbursement  
INTERN SALARY

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60714.E12955

Date of Disbursement

06 / 20 / 2006

Amount of Each Disbursement this Period

320.00

INTERN SALARY

**SUBTOTAL** of Disbursements This Page (optional) .....

1019.19

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

A. Full Name (Last, First, Middle Initial)  
Ellen Wray Davis

Mailing Address 10426 Springpark Ave

City State Zip Code  
Baton Rouge LA 70810-

Purpose of Disbursement  
COMMISSION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60714.E12950

Date of Disbursement

/   /

Amount of Each Disbursement this Period

840.00

COMMISSION

B. Full Name (Last, First, Middle Initial)  
De Lage Landen Financial Svcs

Mailing Address P. O. Box 41601

City State Zip Code  
Philadelphia PA 19101-1601

Purpose of Disbursement  
COMPUTER LEASING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60714.E12960

Date of Disbursement

/   /

Amount of Each Disbursement this Period

328.19

COMPUTER LEASING

C. Full Name (Last, First, Middle Initial)  
Demco

Mailing Address P. O. Box 2153

City State Zip Code  
Birmingham AL 35287-1340

Purpose of Disbursement  
UTILITIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60714.E12908

Date of Disbursement

/   /

Amount of Each Disbursement this Period

153.79

UTILITIES

SUBTOTAL of Disbursements This Page (optional) .....

1321.98

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial)

## **A. Direct Mailing Services, Inc**

Mailing Address 12511 East Millburn Avenue

City State Zip Code  
Baton Rouge LA 70815-

Purpose of Disbursement  
GENERIC FUNDRAISING CONSULT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60714.E12984

Date of Disbursement

06 / 26 / 2006

Amount of Each Disbursement this Period

2000.00

GENERIC FUNDRAISING CONSULT

Full Name (Last, First, Middle Initial)

## **B. Fireside Room at Joeys**

Mailing Address 503 Bertrand Dr

City State Zip Code  
Lafayette LA 70506-5542

Purpose of Disbursement  
FOOD FOR LAFAYETTE GENERIC FUNDRAIS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60714.E12941

Date of Disbursement

06 / 15 / 2006

Amount of Each Disbursement this Period

679.68

FOOD FOR LAFAYETTE GENERIC FUNDRAIS

Full Name (Last, First, Middle Initial)

## **C. Gage Telephone**

Mailing Address 11815 Sunbelt Court

City State Zip Code  
Baton Rouge LA 70809-

Purpose of Disbursement  
TELEPHONE REPAIR

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60714.E12907

Date of Disbursement

06 / 09 / 2006

Amount of Each Disbursement this Period

247.50

TELEPHONE REPAIR

**SUBTOTAL** of Disbursements This Page (optional) .....

2927.18

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 27 / 51

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial)

**A.** Arthur J. Gallagher Risk Mgmt Serv

Mailing Address 235 Highlandia Dr Ste 200  
Suite 200

City Baton Rouge State LA Zip Code 70810-5903

Purpose of Disbursement  
INSURANCE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60714.E12953

Date of Disbursement

06 / 20 / 2006

Amount of Each Disbursement this Period

2625.00

INSURANCE

Full Name (Last, First, Middle Initial)

**B.** Jacob Gower

Mailing Address 204 Hermitage Ave.

City Lafayette State LA Zip Code 70503-

Purpose of Disbursement  
INTERN SALARY

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60714.E12881

Date of Disbursement

06 / 06 / 2006

Amount of Each Disbursement this Period

276.00

INTERN SALARY

Full Name (Last, First, Middle Initial)

**C.** Jacob Gower

Mailing Address 204 Hermitage Ave.

City Lafayette State LA Zip Code 70503-

Purpose of Disbursement  
INTERN SALARY

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60714.E12964

Date of Disbursement

06 / 20 / 2006

Amount of Each Disbursement this Period

320.00

INTERN SALARY

**SUBTOTAL** of Disbursements This Page (optional) .....

3221.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A.</b> Full Name (Last, First, Middle Initial) Hanover Insurance Company		<b>Transaction ID:</b> 60714.E12954 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 0 / 2 0 0 6</div> </div>	
Mailing Address P. O. Box 4031		<b>Amount of Each Disbursement this Period</b> <div>852.07</div>	
City Woburn State MA Zip Code 01888-4031	Purpose of Disbursement INS	<input type="text"/>	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
INS			
<b>B.</b> Full Name (Last, First, Middle Initial) Iberia Bank		<b>Transaction ID:</b> 60714.E12880 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 0 / 2 0 0 6</div> </div>	
Mailing Address 3700 Essen Ln		<b>Amount of Each Disbursement this Period</b> <div>23.75</div>	
City Baton Rouge State LA Zip Code 70809-	Purpose of Disbursement BANK FEES	<input type="text"/>	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
BANK FEES			
<b>C.</b> Full Name (Last, First, Middle Initial) Iberia Bank		<b>Transaction ID:</b> 60714.E12939 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 4 / 2 0 0 6</div> </div>	
Mailing Address 3700 Essen Ln		<b>Amount of Each Disbursement this Period</b> <div>30.76</div>	
City Baton Rouge State LA Zip Code 70809-	Purpose of Disbursement MERCHANT FEES	<input type="text"/>	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
MERCHANT FEES			

**SUBTOTAL** of Disbursements This Page (optional) .....

**906.58**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Iberia Bank</b>		<b>Transaction ID:</b> 60714.E12951 <b>Date of Disbursement</b> <div> <div>06</div> <div>15</div> <div>2006</div> </div>	
Mailing Address 3700 Essen Ln		Amount of Each Disbursement this Period <div>750.68</div>	
City Baton Rouge	State LA	Zip Code 70809-	Category/ Type
Purpose of Disbursement PAYROLL TAXES			
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Iberia Bank</b>		<b>Transaction ID:</b> 60714.E12990 <b>Date of Disbursement</b> <div> <div>06</div> <div>29</div> <div>2006</div> </div>	
Mailing Address 3700 Essen Ln		Amount of Each Disbursement this Period <div>1639.38</div>	
City Baton Rouge	State LA	Zip Code 70809-	Category/ Type
Purpose of Disbursement PAYROLL TAXES			
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Iberia Bank Visa</b>		<b>Transaction ID:</b> 60714.E12991 <b>Date of Disbursement</b> <div> <div>06</div> <div>29</div> <div>2006</div> </div>	
Mailing Address PO Box 30495		Amount of Each Disbursement this Period <div>718.00</div>	
City Tampa	State FL	Zip Code 33630-3495	Category/ Type
Purpose of Disbursement DEBT PAYMENT			
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

**SUBTOTAL** of Disbursements This Page (optional) .....

**3108.06**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 30 / 51

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial)

**A.** McDermott, Will & Emory

Mailing Address 600 Thirteenth St. NW

City Washington State DC Zip Code 20005-

Purpose of Disbursement  
LEGAL FEES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60714.E12902

Date of Disbursement

MM / DD / YYYY  
06 / 09 / 2006

Amount of Each Disbursement this Period

500.00

LEGAL FEES

Full Name (Last, First, Middle Initial)

**B.** McDermott, Will & Emory

Mailing Address 600 Thirteenth St. NW

City Washington State DC Zip Code 20005-

Purpose of Disbursement  
LEGAL FEES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60714.E12996

Date of Disbursement

MM / DD / YYYY  
06 / 30 / 2006

Amount of Each Disbursement this Period

500.00

LEGAL FEES

Full Name (Last, First, Middle Initial)

**C.** Eric Miller Photography

Mailing Address 5 Echezeaux Dr

City Kenner State LA Zip Code 70065-1115

Purpose of Disbursement  
PHOTOGRAPHY

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60714.E12877

Date of Disbursement

MM / DD / YYYY  
06 / 09 / 2006

Amount of Each Disbursement this Period

267.00

PHOTOGRAPHY

**SUBTOTAL** of Disbursements This Page (optional) .....

1267.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 31 / 51

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial)

## **A. Office Depot Credit Plan**

Mailing Address P. O. Box 9020

City Des Moines State IA Zip Code 50368-9020

Purpose of Disbursement  
SUPPLIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60714.E12965

Date of Disbursement

06 / 20 / 2006

Amount of Each Disbursement this Period

141.20

SUPPLIES

Full Name (Last, First, Middle Initial)

## **B. James L Quinn**

Mailing Address 419 Northline St

City Metairie State LA Zip Code 70005-4451

Purpose of Disbursement  
SALARY

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60714.E12883

Date of Disbursement

06 / 09 / 2006

Amount of Each Disbursement this Period

1354.39

SALARY

Full Name (Last, First, Middle Initial)

## **C. James L Quinn**

Mailing Address 419 Northline St

City Metairie State LA Zip Code 70005-4451

Purpose of Disbursement  
SALARY

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60714.E12884

Date of Disbursement

06 / 20 / 2006

Amount of Each Disbursement this Period

1354.39

SALARY

**SUBTOTAL** of Disbursements This Page (optional) .....

2849.98

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 32 / 51

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial)

## **A. R & C Properties**

Mailing Address 16851 Cicero Ave

City Baton Rouge State LA Zip Code 70816-1853

Purpose of Disbursement  
RENT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60714.E12999

Date of Disbursement

06 / 29 / 2006

Amount of Each Disbursement this Period

2385.00

RENT

Full Name (Last, First, Middle Initial)

## **B. Sams Club**

Mailing Address 10444 N Mall Dr

City Baton Rouge State LA Zip Code 70809-4835

Purpose of Disbursement  
FOOD LAFAYETTE GENERIC FUNDRAISER

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60714.E12940

Date of Disbursement

06 / 15 / 2006

Amount of Each Disbursement this Period

183.65

FOOD LAFAYETTE GENERIC FU-  
NDRAISER

Full Name (Last, First, Middle Initial)

## **C. Sams Club**

Mailing Address 10444 N Mall Dr

City Baton Rouge State LA Zip Code 70809-4835

Purpose of Disbursement  
AUTO

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60714.E12963

Date of Disbursement

06 / 20 / 2006

Amount of Each Disbursement this Period

29.00

AUTO

**SUBTOTAL** of Disbursements This Page (optional) .....

2597.65

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 33 / 51

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial)

## **A. Targeted Creative Communicatio**

Mailing Address 1000 Duke Street

City Alexandria State VA Zip Code 22314-

Purpose of Disbursement  
DEBT REPAYMENT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60714.E12901

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

DEBT REPAYMENT

Full Name (Last, First, Middle Initial)

## **B. Targeted Creative Communicatio**

Mailing Address 1000 Duke Street

City Alexandria State VA Zip Code 22314-

Purpose of Disbursement  
DEBT REPAYMENT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60714.E12987

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

DEBT REPAYMENT

Full Name (Last, First, Middle Initial)

## **C. U S Postmaster**

Mailing Address 10380 Perkins Rd

City Baton Rouge State LA Zip Code 70810-

Purpose of Disbursement  
THANK YOU LTRS BULK POSTAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60714.E12966

Date of Disbursement

/   /

Amount of Each Disbursement this Period

30.19

THANK YOU LTRS BULK POSTAGE

**SUBTOTAL** of Disbursements This Page (optional) .....

1030.19

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 34 / 51

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

A. Full Name (Last, First, Middle Initial)  
U S Postmaster

Mailing Address 10380 Perkins Rd

City State Zip Code  
Baton Rouge LA 70810-

Purpose of Disbursement  
POSTAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 60714.E12986

Date of Disbursement

/   /

Amount of Each Disbursement this Period

117.00

POSTAGE

SUBTOTAL of Disbursements This Page (optional) .....

117.00

TOTAL This Period (last page this line number only) .....

26753.12

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial)

**A.** Alexandria Office Suites

Mailing Address 1104 Macarthur Dr

City Alexandria State LA Zip Code 71303-3122

Purpose of Disbursement  
FEA GENERIC VOTER DRIVE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60714.E12982

Date of Disbursement

/   /

Amount of Each Disbursement this Period

400.00

FEA GENERIC VOTER DRIVE

Full Name (Last, First, Middle Initial)

**B.** ALLTELL

Mailing Address P O Box 530533

City Atlanta State GA Zip Code 30353-0533

Purpose of Disbursement  
FEA GENERIC VOTER DRIVE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60714.E13006

Date of Disbursement

/   /

Amount of Each Disbursement this Period

405.65

FEA GENERIC VOTER DRIVE

Full Name (Last, First, Middle Initial)

**C.** ALLTELL

Mailing Address P O Box 530533

City Atlanta State GA Zip Code 30353-0533

Purpose of Disbursement  
FEA GENERIC VOTER DRIVE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60714.E13010

Date of Disbursement

/   /

Amount of Each Disbursement this Period

252.99

FEA GENERIC VOTER DRIVE

**SUBTOTAL** of Disbursements This Page (optional) .....

1058.64

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial)

**A.** ALLTELL

Mailing Address P O Box 530533

City Atlanta State GA Zip Code 30353-0533

Purpose of Disbursement  
FEA GENERIC VOTER DRIVE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60714.E13013

Date of Disbursement

06 / 30 / 2006

Amount of Each Disbursement this Period

138.18

FEA GENERIC VOTER DRIVE

Full Name (Last, First, Middle Initial)

**B.** Sharon & Frank Bonner

Mailing Address 2401 Jasmine St

City Monroe State LA Zip Code 71201-4127

Purpose of Disbursement  
FEA GENERIC VOTER DRIVE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60714.E12985

Date of Disbursement

06 / 26 / 2006

Amount of Each Disbursement this Period

500.00

FEA GENERIC VOTER DRIVE

Full Name (Last, First, Middle Initial)

**C.** Blake Cooper

Mailing Address 927 Stones Way Dr

City Pineville State LA Zip Code 71360-4008

Purpose of Disbursement  
FEA GENERIC VOTER DRIVE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60714.E12899

Date of Disbursement

06 / 06 / 2006

Amount of Each Disbursement this Period

1695.65

FEA GENERIC VOTER DRIVE

**SUBTOTAL** of Disbursements This Page (optional) .....

2333.83

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A. Blake Cooper</b> Full Name (Last, First, Middle Initial) Mailing Address 927 Stones Way Dr City Pineville State LA Zip Code 71360-4008 Purpose of Disbursement FEA GENERIC VOTER DRIVE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 60714.E12983</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 6 Amount of Each Disbursement this Period 1695.65 FEA GENERIC VOTER DRIVE
<b>B. Cooper Eyre</b> Full Name (Last, First, Middle Initial) Mailing Address 4813 West Gordon City Alexandria State LA Zip Code 71303- Purpose of Disbursement FEA GENERIC VOTER DRIVE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 60714.E12897</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 6 / 2 0 0 6 Amount of Each Disbursement this Period 75.00 FEA GENERIC VOTER DRIVE
<b>C. Cooper Eyre</b> Full Name (Last, First, Middle Initial) Mailing Address 4813 West Gordon City Alexandria State LA Zip Code 71303- Purpose of Disbursement FEA GENERIC VOTER DRIVE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 60714.E12931</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 6 Amount of Each Disbursement this Period 125.00 FEA GENERIC VOTER DRIVE

**SUBTOTAL** of Disbursements This Page (optional) .....

1895.65

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial)

**A.** Cooper Eyre

Mailing Address 4813 West Gordon

City Alexandria State LA Zip Code 71303-

Purpose of Disbursement  
FEA GENERIC VOTER DRIVE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60714.E12974

Date of Disbursement

/   /

Amount of Each Disbursement this Period

175.00

FEA GENERIC VOTER DRIVE

Full Name (Last, First, Middle Initial)

**B.** David Mayeaux

Mailing Address 1412 Oaklane Loop

City Pineville State LA Zip Code 71360-3512

Purpose of Disbursement  
FEA GENERIC VOTER DRIVE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60714.E12888

Date of Disbursement

/   /

Amount of Each Disbursement this Period

125.00

FEA GENERIC VOTER DRIVE

Full Name (Last, First, Middle Initial)

**C.** David Mayeaux

Mailing Address 1412 Oaklane Loop

City Pineville State LA Zip Code 71360-3512

Purpose of Disbursement  
FEA GENERIC VOTER DRIVE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60714.E12926

Date of Disbursement

/   /

Amount of Each Disbursement this Period

135.00

FEA GENERIC VOTER DRIVE

**SUBTOTAL** of Disbursements This Page (optional) .....

435.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial)

**A.** David Mayeaux

Mailing Address 1412 Oaklane Loop

City Pineville State LA Zip Code 71360-3512

Purpose of Disbursement  
FEA GENERIC VOTER DRIVE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60714.E12969

Date of Disbursement

/   /

Amount of Each Disbursement this Period

175.00

FEA GENERIC VOTER DRIVE

Full Name (Last, First, Middle Initial)

**B.** Chris McLin

Mailing Address 14050 Oaklane Loop

City Pineville State LA Zip Code 71360-

Purpose of Disbursement  
FEA GENERIC VOTER DRIVE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60714.E12887

Date of Disbursement

/   /

Amount of Each Disbursement this Period

125.00

FEA GENERIC VOTER DRIVE

Full Name (Last, First, Middle Initial)

**C.** Chris McLin

Mailing Address 14050 Oaklane Loop

City Pineville State LA Zip Code 71360-

Purpose of Disbursement  
FEA GENERIC VOTER DRIVE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60714.E12925

Date of Disbursement

/   /

Amount of Each Disbursement this Period

160.00

FEA GENERIC VOTER DRIVE

**SUBTOTAL** of Disbursements This Page (optional) .....

460.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A. Chris McLin</b> Full Name (Last, First, Middle Initial) Mailing Address 14050 Oaklane Loop City Pineville State LA Zip Code 71360- Purpose of Disbursement FEA GENERIC VOTER DRIVE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 60714.E12968</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 6 Amount of Each Disbursement this Period 225.00 FEA GENERIC VOTER DRIVE
<b>B. Scott Melvin</b> Full Name (Last, First, Middle Initial) Mailing Address 1412 Oaklane Loop City Pineville State LA Zip Code 71360-3512 Purpose of Disbursement FEA GENERIC VOTER DRIVE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 60714.E12889</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 6 / 2 0 0 6 Amount of Each Disbursement this Period 125.00 FEA GENERIC VOTER DRIVE
<b>C. Scott Melvin</b> Full Name (Last, First, Middle Initial) Mailing Address 1412 Oaklane Loop City Pineville State LA Zip Code 71360-3512 Purpose of Disbursement FEA GENERIC VOTER DRIVE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 60714.E12927</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 6 Amount of Each Disbursement this Period 110.00 FEA GENERIC VOTER DRIVE
<b>SUBTOTAL of Disbursements This Page (optional)</b> ..... ▶		<b>460.00</b>
<b>TOTAL This Period (last page this line number only)</b> ..... ▶		



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A.</b> Full Name (Last, First, Middle Initial) Scott Melvin		<b>Transaction ID:</b> 60714.E12970 <b>Date of Disbursement</b> <div> <div>06</div> <div>26</div> <div>2006</div> </div>	
Mailing Address 1412 Oaklane Loop			
City Pineville	State LA	Zip Code 71360-3512	
Purpose of Disbursement FEA GENERIC VOTER DRIVE		<div> <div></div> <div>Category/ Type</div> </div>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	FEA GENERIC VOTER DRIVE		
<b>B.</b> Full Name (Last, First, Middle Initial) Allison Norris		<b>Transaction ID:</b> 60714.E12935 <b>Date of Disbursement</b> <div> <div>06</div> <div>12</div> <div>2006</div> </div>	
Mailing Address 1712 Handy Loop Ext			
City Pineville	State LA	Zip Code 71360-	
Purpose of Disbursement FEA GENERIC VOTER DRIVE		<div> <div></div> <div>Category/ Type</div> </div>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	FEA GENERIC VOTER DRIVE		
<b>C.</b> Full Name (Last, First, Middle Initial) Allison Norris		<b>Transaction ID:</b> 60714.E12976 <b>Date of Disbursement</b> <div> <div>06</div> <div>26</div> <div>2006</div> </div>	
Mailing Address 1712 Handy Loop Ext			
City Pineville	State LA	Zip Code 71360-	
Purpose of Disbursement FEA GENERIC VOTER DRIVE		<div> <div></div> <div>Category/ Type</div> </div>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	FEA GENERIC VOTER DRIVE		

**SUBTOTAL** of Disbursements This Page (optional) .....

**450.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A.</b> Full Name (Last, First, Middle Initial) Allison Swain		<b>Transaction ID:</b> 60714.E12898 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 6 / 2 0 0 6</div> </div>	
Mailing Address 480 Hooper Rd		Amount of Each Disbursement this Period <div>50.00</div>	
City Deville	State LA		Zip Code 71328-
Purpose of Disbursement FEA GENERIC VOTER DRIVE			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		FEA GENERIC VOTER DRIVE
<b>B.</b> Full Name (Last, First, Middle Initial) Allison Swain		<b>Transaction ID:</b> 60714.E12932 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 2 / 2 0 0 6</div> </div>	
Mailing Address 480 Hooper Rd		Amount of Each Disbursement this Period <div>125.00</div>	
City Deville	State LA		Zip Code 71328-
Purpose of Disbursement FEA GENERIC VOTER DRIVE			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		FEA GENERIC VOTER DRIVE
<b>C.</b> Full Name (Last, First, Middle Initial) Allison Swain		<b>Transaction ID:</b> 60714.E12975 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 6 / 2 0 0 6</div> </div>	
Mailing Address 480 Hooper Rd		Amount of Each Disbursement this Period <div>175.00</div>	
City Deville	State LA		Zip Code 71328-
Purpose of Disbursement FEA GENERIC VOTER DRIVE			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		FEA GENERIC VOTER DRIVE

**SUBTOTAL** of Disbursements This Page (optional) .....

**350.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial)

**A.** Amanda Swanner

Mailing Address 3100 Deborah Dr Apt 22

City Monroe State LA Zip Code 71201-2090

Purpose of Disbursement  
FEA GENERIC VOTER DRIVE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60714.E12942

Date of Disbursement

/

Amount of Each Disbursement this Period

1500.00

FEA GENERIC VOTER DRIVE

Full Name (Last, First, Middle Initial)

**B.** Target Stores

Mailing Address 4103 Pecanland Mall Road

City Monroe State LA Zip Code 71203-

Purpose of Disbursement  
FEA GENERIC VOTER DRIVE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60714.E13014

Date of Disbursement

/

Amount of Each Disbursement this Period

586.09

FEA GENERIC VOTER DRIVE

Full Name (Last, First, Middle Initial)

**C.** Dustin Walker

Mailing Address 408 Hines Ln

City Ball State LA Zip Code 71405-3903

Purpose of Disbursement  
FEA GENERIC VOTER DRIVE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60714.E12891

Date of Disbursement

/

Amount of Each Disbursement this Period

100.00

FEA GENERIC VOTER DRIVE

**SUBTOTAL** of Disbursements This Page (optional) .....

2186.09

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 44 / 51

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A.</b> Full Name (Last, First, Middle Initial) Dustin Walker		<b>Transaction ID:</b> 60714.E12928 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	6		1	2		2	0	0	6														
Mailing Address 408 Hines Ln		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td colspan="10">135.00</td> </tr> </table>		135.00																			
135.00																							
City Ball State LA Zip Code 71405-3903	Purpose of Disbursement FEA GENERIC VOTER DRIVE Candidate Name	<input type="checkbox"/> Category/ Type	FEA GENERIC VOTER DRIVE																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:           District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
<b>B.</b> Full Name (Last, First, Middle Initial) Dustin Walker		<b>Transaction ID:</b> 60714.E12971 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	6		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	6		2	6		2	0	0	6														
Mailing Address 408 Hines Ln		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td colspan="10">225.00</td> </tr> </table>		225.00																			
225.00																							
City Ball State LA Zip Code 71405-3903	Purpose of Disbursement FEA GENERIC VOTER DRIVE Candidate Name	<input type="checkbox"/> Category/ Type	FEA GENERIC VOTER DRIVE																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:           District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

360.00

**TOTAL** This Period (last page this line number only) ..... ►

9989.21

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 45 / 51

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Baton Rouge MarriottNature of Debt (Purpose):  
Negotiated SettlementMailing Address Formerly the B.R. Hilton/Davidson  
1755 Lynnfield Road- Suite 142City State ZIP Code  
Memphis TN 38119-

Outstanding Balance Beginning This Period

181.00

Transaction ID: 7LS0614200111E5406

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

181.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
MCREI IncNature of Debt (Purpose):  
Campaign Calls

Mailing Address 3937 Pines Rd, Ste 1

City State ZIP Code  
Shreveport LA 71119-

Outstanding Balance Beginning This Period

6019.84

Transaction ID: 4LS50729.E12245

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6019.84

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Bauer for PresidentNature of Debt (Purpose):  
Ballot Access Fee Refund

Mailing Address P O Box 6616

City State ZIP Code  
Arlington VA 22206-0616

Outstanding Balance Beginning This Period

3500.00

Transaction ID: 5LS0614200111E5408

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3500.00

**1) SUBTOTALS** This Period This Page (optional).....

9700.84

**2) TOTALS** This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 46 / 51

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Thomas Graphics

Nature of Debt (Purpose):  
Yard Signs-Exempt Activity

Mailing Address P. O. Box 142226

City State ZIP Code  
Austin TX 78714-

Outstanding Balance Beginning This Period

2000.00

Transaction ID: 9LS50729.E12246

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Targeted Creative Communicatio

Nature of Debt (Purpose):  
Volunteer Mass Mail

Mailing Address 1000 Duke Street

City State ZIP Code  
Alexandria VA 22314-

Outstanding Balance Beginning This Period

40000.00

Transaction ID: 2LS50131.E11683

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

40000.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Targeted Creative Communicatio

Nature of Debt (Purpose):  
debt repayment

Mailing Address 1000 Duke Street

City State ZIP Code  
Alexandria VA 22314-

Outstanding Balance Beginning This Period

15000.00

Transaction ID: 6LS60714.E12901

Amount Incurred This Period

0.00

Payment This Period

1000.00

Outstanding Balance at Close of This Period

14000.00

1) **SUBTOTALS** This Period This Page (optional).....

56000.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 47 / 51

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Jamestown Associates

Nature of Debt (Purpose):  
FEA Volunteer Mass Mail

Mailing Address 5 Mapleton Rd, Suite 300

City State ZIP Code  
Princeton NJ 08540-

Outstanding Balance Beginning This Period

3800.00

Transaction ID: 1LS50131.E11682

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3800.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Iberia Bank Visa

Nature of Debt (Purpose):  
debt payment

Mailing Address PO Box 30495

City State ZIP Code  
Tampa FL 33630-3495

Outstanding Balance Beginning This Period

11516.53

Transaction ID: LS60714.E12991

Amount Incurred This Period

0.00

Payment This Period

718.00

Outstanding Balance at Close of This Period

10798.53

1) **SUBTOTALS** This Period This Page (optional).....

14598.53

2) **TOTALS** This Period (last page this line number only).....

80299.37

3) **TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**METHOD OF ALLOCATION FOR:**

- **SHARED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **SHARED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)**(Seperate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

**USE ONLY ONE SECTION, A or B****A. State and Local Party Committees****Fixed Percentage (select one)**

- \_\_\_\_\_ Presidential-Only Election Year (28% Federal)
- \_\_\_\_\_ Presidential and Senate Election Year (36% Federal)
- \_\_\_\_\_ Senate-Only Election Year (21% Federal)
- X  Non-Presidential and Non-Senate Election Year (15% Federal)

**B. Separate Segregated Funds and Nonconnected Committees****Flat Minimum Federal Percentage**

If the committee will allocate using the flat minimum percentage of 50% federal funds, check ☐

**or**

If the committee is spending more than 50% federal funds, indicate ratio below

Federal.....  %

Nonfederal.....  %

This ratio applies to (check all that apply):

Administrative ☐ Generic Voter Drive ☐ Public Communications Referencing Party Only ☐



**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 49 / 51  
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)  
 Republican Party of Louisiana

NAME OF ACCOUNT  
 RPL- Federal 11140  
 North Lake Sherwoo

DATE OF RECEIPT

M M / D D / Y Y Y Y  
 0 6 / 3 0 / 2 0 0 6

TOTAL AMOUNT TRANSFERRED

28.49

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

28.49

Transaction ID: H360720.C58273

ii) Generic Voter Drive .....

Transaction ID:

iii) Exempt Activities .....

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

v) Direct Candidate Support (List of Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

28.49

TOTAL This Period (Generic Voter Drive) .....

0.00

TOTAL This Period (Exempt Activities) .....

0.00

TOTAL This Period (Direct Fundraising) .....

0.00

TOTAL This Period (Direct Candidate Support) .....

0.00

TOTAL This Period (Public Communications Referring Only to Party) .....

0.00

TOTAL This Period (Total Amount Transferred) .....

28.49

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 50 / 51

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

**A.** Full Name (Last, First, Middle Initial)  
Iberia Bank

Mailing Address

3700 Essen Ln

City

State

Zip Code

Baton Rouge

LA

70809-

Purpose of Disbursement:  
bank fees

Category/  
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

36381.30

Activity or Event Identifier:  
ADMINISTRATION B 41

Date

M M / D D / Y Y Y Y  
0 6 / 2 0 / 2 0 0 6

Transaction ID: H460714.E12879

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

5.03

28.49

33.52

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

5.03

28.49

33.52

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

5.03

28.49

33.52

Image# 26960664598

Form/Schedule: **F3XA**

NOTE: THIS AMENDED REPORT IS IN RESPONSE TO FEC LETTER DATED OCTOBER 25, 2006. THERE WERE NO EMPLOYEES WITH MORE THAN 25% TIME SPENT ON FEDERAL ACTIVITY DURING THE PERIODS IN QUESTION.

Transaction ID: **C00187450**

\*\*\*\*\*